



# Certificate LIHC Low-Income Housing Credit Allotment

2007

Massachusetts  
Department of  
Revenue

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**For calendar year 2007 or taxable year beginning****and ending**

Name of recipient	Social Security or Federal Identification number		
Street address	City/Town	State	Zip
Name of project	Building identification number		
Street address	City/Town	State	Zip
Name of project owner	Federal Identification number		
Street address	City/Town	State	Zip

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**Taxpayer's Credit Share**

This statement is issued by the owner of a project that is eligible to claim the Massachusetts Low-Income Housing Credit (LIHC) to each recipient to whom the owner has allocated a portion of the LIHC in accordance with the organizational documents governing the owner. The recipient should enter the amount of the credit being received from the project on the LIHC line of the appropriate tax return. Retain this statement with your records.

**Allotment Information**

- 1** Amount of allotted credit ..... 1
- 2** Date of filing of Election of Early Tax Credit (if applicable) \_\_\_\_\_